

**UNITED STATES NATIONAL STAGE WORKSHEET (DO/EO)**

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10/540383

U. S. Application No. \_\_\_\_\_

Publication Date 7.15.04

Publication No. WO \_\_\_\_\_ PCT/RO/101 \_\_\_\_\_

Copy of ISR EP, Copy of IPER \_\_\_\_\_

Assignee information: \_\_\_\_\_

Priority Info: Country EP No. 02080587.5 date 12.30.02 MORE

Correspondence checked: 00959 deposit account \_\_\_\_\_

Inventor Residence city: \_\_\_\_\_, state and/or country \_\_\_\_\_ citizenship: \_\_\_\_\_

International Application No. PCT \_\_\_\_\_ Language \_\_\_\_\_

Copy in International Application: ☒; Translation: yes \_\_\_\_\_ no \_\_\_\_\_ Spec.pg no. \_\_\_\_\_

371 Filing Fees: 900; US IPER meets Art. 33(2)-(3) Low fee applies: \_\_\_\_\_

Total Claims: 10 Chargeable 10 Independent 1 multiple \_\_\_\_\_

Number of drawing Sheets: 7 Foreign language: \_\_\_\_\_

Oath/Declaration: ☐ signed ☐ unsigned ☐ defective ☐ completed \_\_\_\_\_ Power of Attorney: \_\_\_\_\_

Small entity fee: \_\_\_\_\_ SME document yes \_\_\_\_\_ no \_\_\_\_\_

Bio Seq. Diskette: \_\_\_\_\_ entered \_\_\_\_\_ Bio Seq. Listing: \_\_\_\_\_ statement \_\_\_\_\_

Article 19 Amendment: \_\_\_\_\_; replaced by Article 34 Amdt. \_\_\_\_\_

Copy ISA References \_\_\_\_\_

Copy of IPER: \_\_\_\_\_; Annexes: ☒ entered \_\_\_\_\_ not entered \_\_\_\_\_ Text sequence improper \_\_\_\_\_

Preliminary Amendment(s): ☒ date: 6.22.05; 2<sup>nd</sup> amendment date \_\_\_\_\_

IDS: ☒ DATE: 8.17.05 2<sup>nd</sup> \_\_\_\_\_ DATE \_\_\_\_\_

Request for Immediate Examination: \_\_\_\_\_

Substitute Specification: \_\_\_\_\_ date: \_\_\_\_\_

Assignment: \_\_\_\_\_ forwarded to Assignment branch date: \_\_\_\_\_

Priority Document(s): ☒ Number of copies included 1

Date of 35 USC Receipt of Request: 6.22.05

**Notes:**

Date Completion USC 371 Requirements: \_\_\_\_\_

Notice of Missing Requirements: 12.17.05

Notice of Defective Response: \_\_\_\_\_

Notice of Acceptance: \_\_\_\_\_

Notice of Abandonment: \_\_\_\_\_ Petition to Revive: \_\_\_\_\_

Other forms: 304 Extension of time: Number of months \_\_\_\_\_

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